19 14:03 Qisda 03-3593389

PART B - FEE(S) TRANSMITTAL

omplete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEB (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)

Qisda Corporation 157 Shan-Ying Road, Gueishan

Taoyuan 333, Talwan

Note: A certificate of mailing can only be used for domestic mailings of the Pec(s) Transmittal, This certificate cannot be used for any other accompanying papers. Each additional paper, such as on estignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission
I hereby certify that this Fec(s) Transmittal is being deposited with the United
States Postal Service with sufficient postage for first class small in a envelope
addressed to the Mail Stop ISSUE FEE address above, or being ficesimile
transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depostrarie name (Signature (Date)

APPLICATION NO.	PILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/596,339	08-24-2006	Alexander Jaczyk	TC03B10004	5424	

TITLE OF INVENTION: COMMUNICATION DEVICE AND METHOD FOR INPUTTING AND PREDICTING YEXT

		•			•		
APPLN. TYPE	SMALL ENTITY	issue pee		PUBLICATION FER	TOTAL FEE(S) DUE	DATE D	DATE DUE
Innoisivorquon	NO	\$1510	Ö	\$300	\$1810		10/12/2011
EXAMINER		ART UNIT		CLASS-SUBCLASS		63	
DANG, HUNG Q		2835		341-02200		10596339	
Change of correspon Address form PTO/SB/4 "Fee Address" indica PTO/SB/47; Roy 03-02: Number is required. 3. ASSIGNEE NAME ANI PLEASE NOTE: Unless recordation as set forth is (A) NAME OF ASSIGN		Correspondence ation form a of a Customer BE PRINTED ON 1 clow, no assigned of this form is NO	(1) the magnets (2) the magnetistered 2 registered 2 registered that the control of the PATEN data will appropriate the control of the patent will be c	pear on the patent. If an assignment, for filing an assignment, CE: (CITY and STATE OR CO	a member a 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	00004 504705	uned to the following the foll
4a. The following fee(s) are Issue Fee Description Fee (No.)		4t ed)	Payment of A check	potent): Individual Significants: Cree(s): In the amount of the fee(s) is entry credit card. Form PTO-203 octor is hereby authorized by a count Number 60-476	nelosed. S la ettechad	20/20	1111 11111 111111111111111111111111111
a, Applicant claims S	(from status Indicated abow MALL ENTITY status. See is requested to apply the Iss lubication Fee (if required) ords of the United States Pat	37 CFR 1.27.	☐ b. Appli	cant is no longer cloiming SMA ny) or to re-apply any previous so other than the applicant; a res	LL BNTITY status, See 3	7 CFR	1.27(g)(2).
Authorized Signature Typed or printed name		Chan-			9/19/2011		•
	2.1444			to obtain or retain a benefit by illection is estimated to take 12 pon the individual case. Any c mailen Officer, U.S. Pateni and D FORMS TO THIS ADDRES illoction of information unless is			

PTOL-85 (Rev. 08-08) Approved for use through 08/31/2010. QMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE